

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 165 OF 257  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**MAVERICK PAC USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. UTHMEIER, JAMES, , ,**

Mailing Address 300 S DUVAL ST.

City

TALLAHASSEE

State

FL

Zip Code

32301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

DEPUTY GENERAL COUNSEL

Occupation (for Individual)

DEPUTY GENERAL COUNSEL

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2019

Transaction ID : SA11AI.5671

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VANDER POEL, NICK, , ,**

Mailing Address 6188 LAURELWOOD DR

City

RENO

State

NV

Zip Code

89502

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CAPITOL PARTNERS

Occupation (for Individual)

CONSULTANT

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2019

Transaction ID : SA11AI.5545

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALKER, JAMES, , ,**

Mailing Address 4902 DORSET AVE

City

CHEVY CHASE

State

MD

Zip Code

20815

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

WOLF DEN ASSOCIATES

Occupation (for Individual)

CONSULTANT

Receipt For:

☐ Primary  
☐ Other (specify)
☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2019

Transaction ID : SA11AI.6577

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

900.00

TOTAL This Period (last page this line number only)..... ►